Name in Full

Certificate of Death

Wm Anderson

Town

County

Died at Almshouse Queen Annes County MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Date 1899 Oct	26th	Age 21			Va	Pauper

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ Widower Divorced ~~Number of children living~~

Husband / Wife of

Father's Name —

Mother's Name

Cause of Death — Primary: Pulmonary Consumption — How long sick: 1 Year

Immediate: —

Accident, Suicide, Homicide

Reported by J. A. Holton M D

Address Centreville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Name in Full: Harriet A. Bordley

Certificate of Death

Died at: Town: Inglesside; County: A. A.; MARYLAND

Date 1899: Month: Oct.; Day: 13; Age: Y. 51 M. D.; Native of: Md.; Occupation: Housewife

Male / ~~Female~~ | ~~White~~ / Colored | Married / ~~Single~~ / ~~Widow~~ / Widower | ~~Divorced~~ | Number of children living: One

Husband / Wife of: James W. Bordley

Father's Name:

Mother's Name: 22a

Cause of Death — Primary: Tuberculosis of Lungs

Immediate: Dropsy

How long sick: Two years

Accident, Suicide, Homicide

Reported by: Gaerlingham

Address: Inglesside Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6595B

Name in Full Chas. Brown

Certificate of Death

Died at Town Guys County Q.A. MARYLAND

Date 189 9 Month Oct. Day 2 | Age Y. 26 M. ~ D. ~ | Native of Q.A. Co, Md | Occupation Farm Hand

Male ~~Female~~ | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ Widower | ~~Divorced~~

Number of children living none

Husband ~~Wife~~ of Annie Brown /

Father's Name Chas. Brown

Mother's Name Mary Brown

Cause of Death: Primary Typho-Malaria Fever on a Case of Syphilis, Hemorrhage of Bowel

How long sick 5 days

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Chas. F Dawson

Address Queenstown, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 69968

Name in Full — Certificate of Death

George Thomas Cannan

Died at Town: Crumpton — County: Queen Anne — MARYLAND

Date 1899 Month: Oct. Day: 14 | Age Y.: 55 M.: 6 D.: 20 | Native of: Md | Occupation: Fisherman

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~

Number of children living

~~Wife~~ Husband of Fannie A Wallo 5-5

Father's Name: Thomas Cannan

Mother's Name: Susan Burlett

Cause of Death — Primary: Rheumatic Pericarditis — How long sick: 3 months

Immediate: Valvular Heart Trouble — ~~Accident, Suicide, Homicide~~

Reported by F. N. Sheppard M.D.

Address Crumpton Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55868

Name in Full Rosie Cox

Certificate of Death

Died at Town Centreville County Queen Anne's MARYLAND

Date 189 Month Oct 15 Day | Age Y. 6 M. — D. — | Native of | Occupation

Male Female | White Colored | Married Single | Widow Widower | Divorced | Number of children living

Husband of

Wife

Father's Name Jewell Cox

Mother's Name Amanda Cox

Cause of Death: Primary Marasmus 82 How long sick Left

Immediate Infection

Accident, Suicide, Homicide

Reported by Jas Bordley

Address Centreville

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 66888

Name in Full

Mary Ewing

Certificate of Death

Town | County

Died at Inglside | Md. | MARYLAND

Month | Day | Y. | M. | D. | Native of | Occupation

Date 1899 Oct. 5th | Age 13 | Md | Child

~~Male~~ | White | Married | ~~Widow~~ | Divorced

Female | Colored | ~~Single~~ | ~~Widower~~ | ~~Number of children living~~

Husband of Wife

114

Father's Name Alfred Ewing

Mother's Name Fannie Ewing

Cause of Death { Primary Vicarious Menstruation | How long sick

Immediate Congestion of Brain | Accident, Suicide, Homicide

Reported by A. E. Graham

Address Inglside Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55668

Name in Full — Certificate of Death

Ida Glanden

Died ~~at~~ Town: Templeville, County: Queen Anne, MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
10	16	2	7	0	Md	

Date 1899 — Age

~~Male~~ / Female — ~~Colored~~ / White — ~~Married~~ / Single — ~~Widow~~ / Widower — ~~Divorced~~ / Number of children living

Husband / Wife of

Father's Name: William Glanden — Mother's Name: Mary Francis Glanden

Cause of Death — Primary: Enteritis — How long sick: 2 wks.

Immediate: Exhaustion — ~~Accident, Suicide, Homicide~~

Reported by: Jas. E. Gallery

Address: Templeville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 85960

Name in Full Asbury Hadley Perry — Certificate of Death

Died at Town: Centreville County: Queen Annes MARYLAND

Date 1899 Month: 9 Day: 10 — Age Y. 1 M. 3 D. 2 — Native of Md — Occupation —

Male / Female — White / Colored — Married / Single — Widow / Widower — Divorced / Number of children living

Husband / Wife of —

Father's Name Thos Perry — Mother's Name Henrietta Perry

Cause of Death — Primary: Influenza — How long sick 2 or 3 days

Immediate: Pneumonia — Accident, Suicide, Homicide

Reported by J D Dr J D Dr MD

Address Centreville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, B5988

Name in Full James L. Powell

Certificate of Death

Died at Ingleside Town, Anne Arundel County, MARYLAND

Date 189 Month Oct. Day 9 | Age Y. 81 M. D. | Native of Md. | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ | Number of children living Two

Husbend Wife of Rebecca Powell

Fether's Neme | Mother's Neme

Cause of Death: Primary Old age 141 | How long sick 1 Month

Immediete Heart Failure | Accident, Suicide, Homicide

Reported by Dr. Hoffman

Address Ingleside Md.

Must be signed by physician, if any in ettendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM

Name In Full

Myrtle Ruth

Certificate of Death

Died at Town: Kent Island County: Queen Anne's MARYLAND

Date 189 9 Month: Oct Day: 7 | Age Y. 3 M. -10 D. | Native of Md. | Occupation —

~~White~~ / ~~Colored~~ | Female | ~~Married~~ / Single / ~~Widow~~ / ~~Widower~~ / ~~Divorced~~ | ~~Number of children living~~

Husband / Wife of

Father's Name Dennie Ruth

Mother's Name Blanche Kellar

Cause of Death — Primary: Marasmus — Immediate: Convulsions — 82

How long sick: 6 wks

~~Accident, Suicide, Homicide~~

Reported by C. Percy Kemp, M.D.

Address Kent Island, Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 70008